2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48429

FILED May 04, 2009 Secretary of State

Entity Name: F.O.E. HOLLY HILL AUXILIARY AERIE #4033, FRATERNAL ORDER OF EAGLES, INC.

Current Principal Place of Business: 1165 AVENDA DEL TORO PORT ORANGE, FL 32129		New Principal Place of Business:
		1127 AVENUE ORMOND BEACH, FL 32174
Current M	lailing Address:	New Mailing Address:
	NDA DEL TORO ANGE, FL 32129	1127 AVENUE ORMOND BEACH, FL 32174
In accordan	: 59-3133921 FEI Number Applied For() ice with s. 607.193(2)(b), F.S., the corporation dic I Address of Current Registered Agent:	
DOERLE, DOLORES A. 1165 AVIENDA DEL TORO PORT ORANGE, FL 32129 US		COROLE JACOBS 1127 AVENUE ORMOND BEACH, FL 32174 US
in the State	e named entity submits this statement for th e of Florida.	e purpose of changing its registered office or registered agent, or both,
SIGNATUI	DE 04B01E 1400B0	25/24/2222
	RE: CAROLE JACOBS	05/04/2009
	RE: CAROLE JACOBS Electronic Signature of Registered A	
OFFICER: Title: Name: Address:	Electronic Signature of Registered A	Agent Date
OFFICER: Title: Name: Address: City-St-Zip: Title: Name: Address:	Electronic Signature of Registered A S AND DIRECTORS: PD () Delete SULLIVAN, JEANNE 1589 MEGAN BAY CT	Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address:
	Electronic Signature of Registered A S AND DIRECTORS: PD () Delete SULLIVAN, JEANNE 1589 MEGAN BAY CT DAYTONA BEACH, FL 32117 VD () Delete KEMPF, SUE 1424 ATLANTA DR	Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTOF Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROLE JACOBS SEC 05/04/2009